

Application To Vest Retirement Funds

I hereby request that my retirement contributions and interests remain in the Seattle City Employees' Retirement System.

Please check one:

- ☐ I am leaving the public sector.
☐ I am establishing dual membership.

I understand that:

1. I must have 5 years of retirement service credit.
2. At retirement age, I may request a monthly pension, which will be based on my age, salary and number of years of service, or the value of the accumulated contributions with interest plus a like amount to approximate the employers matching, whichever provides a greater benefit.
3. I may, at any time, change this decision and have my contributions plus interests refunded to me.
4. Vesting my retirement funds will not entitle me to sick leave pay off.
5. I will not be permitted to continue under the "Death Benefit" plan.

Date of Application:	Signature:
	Printed Name:
Department:	Address:
Title:	City: ST.: Zip:
Member Date:	Telephone #:
Date Separated:	Social Security #:
Approximate Contributions: \$	Birth Date of Applicant:
	Birth Date of Spouse:

(or Domestic Partner if Affidavit is filed with the Retirement Office)

Seattle City Employees' Retirement System
720 3rd Ave, Suite 1000, Seattle, WA, 98104 Telephone: (206)386-1293, Fax: (206)386-1506